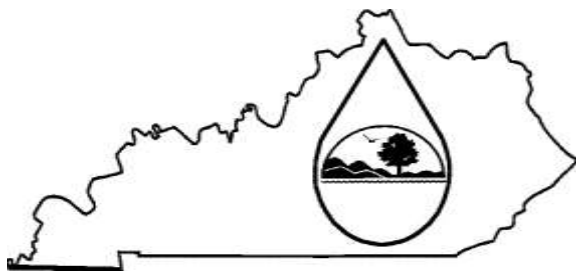


[SHORT FORM B

Kentucky No-Discharge
Operational Permit Application
for Agricultural Wastes
Handling System

For additional information, contact Surface Water Permits Branch, (502) 564-3410.

This is an application to: _____ (Check one)

1. Apply for a new operational permit
2. Apply for reissuance of expiring operational permit
3. Apply for a construction permit (Attach design criteria)

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KNDOP NUMBER (AGENCY USE ONLY)

I. GENERAL INFORMATION

Applicant Name:

Mailing Address:

City, State, Zip Code:

Area Code + Telephone No.:

I. FACILITY DESCRIPTION (Location)

Facility Name

Standard Industrial Classification (SIC) Code and Description: (Please check one)

0241 Dairy Farm 0213 Hog Farm 0212 Beef Farm 0251, 0252 Poultry Farm 0291 Other

Location Address

City, State Zip Code

County where facility is located:

Attach a US Geological Survey 7 1/2-minute quadrangle map for the site with the facility clearly marked. USGS maps may be obtained from the Kentucky Geological Survey, University of Kentucky, Mines and Minerals Building, Room 104, Lexington, KY 40506 or by phone at (859) 257-3896.

**Facility Latitude
(d/m/s)**

**Facility Longitude
(d/m/s)**

III. SOURCE AND DESTINATION OF WASTES

Indicate the number of animals the facility is currently supporting or plans to support in the Table below:

Type of Animals (include approximate live weight per animal)	Number of Animals
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Total:-

Current or planned method of waste storage: (Holding Pond, Holding Tank, Stack Pad, etc.)	
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Approximate number of acres available for land application of wastes:	
--	--

Is this a medium or a large animal feeding operation? No	Yes	If yes, attach nutrient management
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Comments:

I. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

PRINTED OR TYPED NAME OF Person Signing	
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TITLE	
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DATE SIGNED	
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SIGNATURE:

Return completed application form and attachments to: **Surface Water Permits Branch, Division of Water, 200 Fair Oaks Lane, Frankfort, KY 40601. Direct questions to: Surface Water Permits Branch at (502) 564-3410.**

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM
Short FORM B—INSTRUCTIONS

Listed below are explanations of typical Short Form B questions. For additional information, please contact the Division of Water.

I. GENERAL INFORMATION

- a. ~~Not all animal feeding operations or fish farms are required to obtain KPDES discharge permits. The size of the operation and the absence of discharge determine exclusions. Short Form B is for feeding operations that do not discharge to waters of the Commonwealth.~~
- a. ~~See 401 KAR 5:002 for the definition of "animal feeding operation." Please note that an animal feeding operation that discharges or intends to discharge is a "concentrated animal feeding operation" that requires a discharge application on Form 1 and Form B.~~
- b. ~~The applicant name is the official or legal name of the individual, business, or company requesting the permit. The mailing address is the address of the applicant requesting the permit. The Division of Water mails communication to this address unless otherwise indicated.~~

II. FACILITY DESCRIPTION

- c. ~~The facility name is the commonly known and/or uniquely identified name of the facility. The information given as the facility address should be the actual physical location of the facility.~~
- d. ~~Provide the road name, highway number, etc. Do not provide the P.O. Box address.~~

III. SOURCE AND DESTINATION OF WASTES

- a. ~~Give the maximum number of each type of animal in open confinement or housed under roof (either partially or totally) which are held at your facility for a total of 45 days or more in any 12 month period. Use the following categories for type of animals:~~
 - i. ~~Mature Dairy Cattle (milked or dry); Veal Calves; Cattle (other than mature dairy cattle or veal calves); Swine (each weighing over 55 pounds); Swine (each weighing 55 pounds or less); Horses; Sheep; Lambs; Turkeys; Laying Hens; Broilers; and Ducks.~~
 - ii. ~~If the application involves new construction, indicate the number of animals that the facility plans to support.~~
- b. ~~Give only the area used for the land application of waste. Do not include any area used for growing feed.~~
- c. ~~The form presumes that the destination of wastes is land application.~~
- d. ~~Indicate if the facility is a medium or large animal feeding operation as defined in 401 KAR 5:002. If the facility is a medium or large feeding operation, attach the site-specific nutrient management plan.~~
- e. ~~Comments are optional. For example, use this area to clarify that the operation is a liquid waste handling system when the type of operation commonly uses a dry waste handling system.~~

IV. CERTIFICATION

- e. ~~The permit application must be signed as follows:~~
- f. ~~Corporation: by a principal executive officer of at least the level of vice president.~~
- g. ~~Partnership or sole proprietorship: by a general partner or the proprietor.~~
- h. ~~Municipality, state, federal, or other public agency: by either a principal executive officer or ranking elected official.~~